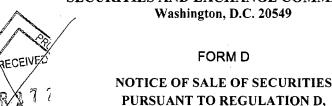
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FORM D

UNITED STATES SECURITIES AND EXCHANGE COMMISSION

Washington, D.C. 20549

SECTION 4(6), AND/OR UNIFORM LIMITED OFFERING EXEMPTION



OMB Approval

OMB Number:

Estimated average burden

3235-0076 Expires: May 31, 2005



RECD S.E.C.

Name of Offering (☐ check if this is an amendment and name has changed, and indicate change.)
Gaviota Avenue Apartments \$250,000 Subordinated Secured Promissory Note

Filing Under (Check box(es) that apply): ☐ Rule 504 ☐ Rule 505 ■ Rule 506

202

☐ Section 4(6)

□ ULOE

Type of Filing: ■ New Filing

☐ Amendment

BASIC IDENTIFICATION DATA

1086

	requested about the issuer	

Name of Issuer (check if this is an amendment and name has changed, and indicate change.) PPA Holdings, LLC

Address of Executive Offices (Number and Street, City, State, Zip Code) 19000 MacArthur Blvd., 5th Floor, Newport Beach, CA 92612

Address of Principal Business Operations (Number and Street, City, State, Zip Code) same

(if different from Executive Offices)

Telephone Number (Including Area Code) 949-488-9400

Telephone Number (Including Area Code) same

Brief Description of Business: Ownership and Management of Apartment Buildings

Type of Business Organization

☐ limited partnership, already formed corporation ☐ limited partnership, to be formed business trust

other (please specify): Limited Liability Company

Actual or Estimated Date of Incorporation or Organization:

Month 2

Year 0

Actual

Estimated

Jurisdiction of Incorporation or Organization: (Enter two-letter U.S. Postal Service abbreviation for State; C CN for Canada; FN for other foreign jurisdiction)

GENERAL INSTRUCTIONS

Federal:

Who Must File: All issuers making an offering of securities in reliance on an exemption under Regulation D or Section 4(6), 17 CFR 230.501 et seq. or 15 U.S.C. 77d(6)

When to File: A notice must be filed no later than 15 days after the first sale of securities in the offering. A notice is deemed filed with the U.S. Securities and Exchange Commission (SEC) on the earlier of the date it is received by the SEC at the address given below or, if received at that address after the date on which it is due, on the date it was mailed by United States registered or certified mail to that address.

Where to File: U.S. Securities and Exchange Commission, 450 Fifth Street, N.W., Washington, D.C. 20549.

Copies Required: Five (5) copies of this notice must be filed with the SEC, one of which must be manually signed. Any copies not manually signed must be photocopies of the manually signed copy or bear typed or printed signatures.

Information Required: A new filing must contain all information requested. Amendments need only report the name of the issuer and offering, any changes thereto, the information requested in Part C, and any material changes from the information previously supplied in Parts A and B. Part E and the Appendix need not be filed with the SEC.

Filing Fee: There is no federal filing fee.

State:

This notice shall be used to indicate reliance on the Uniform Limited Offering Exemption (ULOE) for sales of securities in those states that have adopted ULOE and that have adopted this form. Issuers relying on ULOE must file a separate notice with the Securities Administrator in each state where sales are to be, or have been made. If a state requires the payment of a fee as a precondition to the claim for the exemption, a fee in the proper amount shall accompany this form. This notice shall be filed in the appropriate states in accordance with state law. The Appendix to the notice constitutes a part of this notice and must be completed.

ATTENTION

Failure to file notice in the appropriate states will not result in a loss of the federal exemption. Conversely, failure to file the appropriate federal notice will not result in a loss of an available state exemption unless such exemption is predicated on the filing of a federal notice.

Potential persons who are to respond to the collection of information contained in this form are not required to respond unless the form displays a currently valid OMB control number.

SEC 1972 (6/02) 1 of 5

*Please note disclaimer in transmittal letter attached.



A. BASIC IDENTIFICATION DATA 0. Enter the information requested for the following: Each promoter of the issuer, if the issuer has been organized within the past five years; Each beneficial owner having the power to vote or dispose, or direct the vote or disposition of, 10% or more of a class of equity securities of the issuer: Each executive officer and director of corporate issuers and of corporate general and managing partners of partnership issuers; and Each general and managing partner of partnership issuers. Check Box(es) that Apply: Promoter ■ Beneficial Owner **Executive Officer** ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Stewart, Michael J. Business or Residence Address (Number and Street, City, State, Zip Code) 19000 MacArthur Blvd., 5th Floor, Newport Beach, CA 92612 Beneficial Owner Check Box(es) that Apply: Promoter Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Packard, John J. Business or Residence Address (Number and Street, City, State, Zip Code) 19000 MacArthur Blvd., 5th Floor, Newport Beach, CA 92612 Check Box(es) that Apply: ☐ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or П Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) Check Box(es) that Apply: □ Promoter ☐ Beneficial Owner ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner Check Box(es) that Apply: Promoter ☐ Executive Officer ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Beneficial Owner ☐ Executive Officer Check Box(es) that Apply: ☐ Promoter ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code) ☐ Executive Officer Check Box(es) that Apply: Promoter ☐ Beneficial Owner ☐ Director General and/or Managing Partner Full Name (Last name first, if individual) Business or Residence Address (Number and Street, City, State, Zip Code)

(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

B. INFORMATION ABOUT OFFERING														
0. Has the issuer sold, or does the issuer intend to sell, to non-accredited investors in this offering?								Yes . □	No ■					
	Answer also in Appendix, Column 2, if filing under ULOE.													
0. What is the minimum investment that will be accepted from any individual?								. \$ 10,0	000					
						•		•					Yes	No
0. I	oes the	offering	permit jo	oint own	ership of	a single	unit?			•••••	•••••	••••••		
0. Enter the information requested for each person who has been or will be paid or given, directly or indirectly, any commission or similar remuneration for solicitation of purchasers in connection with sales of securities in the offering. If a person to be listed is an associated person or agent of a broker or dealer registered with the SEC and/or with a state or states, list the name of the broker or dealer. If more than five (5) persons to be listed are associated persons of such a broker or dealer, you may set forth the information for that broker or dealer only.														
	lame (Las oplicable	t name f	irst, if inc	dividual)										
		sidence A	Address (Number	and Stree	t, City, S	tate, Zip	Code)				,		
Name	of Assoc	iated Bro	oker or D	ealer							<u> </u>			
							olicit Puro			.				-
(Chec [AL]	k "All Sta [AK]	ates" or c [AZ]	heck ind [AR]	ividual S [CA]	tates) [CO]	[CT]	[DE]	[DC]	[FL]	[GA]	(HI)	[ID]	□ All	States
[IL]	[IN]	[ÎA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE]	[NV]	[NH]	[NJ]	[NM]	[NY]	[NC]	[ND]	[OH]	[OK]	[OR]	[PA]		
[RI]	[SC]	[SD]	[TN]	[TX]	[UT]	[VT]	[VA]	[WA]	[WV]	[WI]	[WY]	[PR]		
Full N	lame (Las	st name f	irst, if inc	dividual)										
Busin	ess or Re	sidence A	Address (Number	and Stree	t, City, S	tate, Zip	Code)						
Name	of Assoc	iated Bro	ker or D	ealer				•						
							olicit Pur						All	States
[AL]	[AK]	[AZ]	[AR]	[CA]	[CO]	[CT]	[DE]	[DC]	. [FL]	[GA]	[HI]	[ID]		
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]	•	
[TM]	[NE]	[NV]	[NH]	[NJ] [TV]	[NM]	[NY]	[NC]	[ND] [WA]	[OH]	[OK]	[OR]	[PA]		
	[RI] [SC] [SD] [TN] [TX] [UT] [VA] [WA] [WV] [WI] [WY] [PR] Full Name (Last name first, if individual)													
Busin	ess or Re	sidence A	Address (Number	and Stree	t, City, S	tate, Zip	Code)					· ·	
Business or Residence Address (Number and Street, City, State, Zip Code)														
Name of Associated Broker or Dealer														
States in Which Person Listed Has Solicited or Intends to Solicit Purchasers (Check "All States" or check individual States)														
[AL] [AK] [AZ] [AR] [CA] [CO] [CT] [DE] [DC] [FL] [GA] [HI] [ID]														
[IL]	[IN]	[lA]	[KS]	[KY]	[LA]	[ME]	[MD]	[MA]	[MI]	[MN]	[MS]	[MO]		
[MT]	[NE] [SC]	[NV] [SD]	[NH] [TN]	[NJ] [TX]	[NM] [UT]	[NY] [VT]	[NC] [VA]	[ND] [WA]	[OH] [WV]	[OK] [WI]	[OR] [WY]	[PA] [PR]		
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(Use blank sheet, or copy and use additional copies of this sheet, as necessary.)

0.	Enter the aggregate offering price of securities included in this offering and the total amount already sold. Enter "0" if answer is "none" or "zero". If the transaction is an exchange offering, check this box \square and indicate in the columns below the amounts of the securities offered for exchange and already exchanged.				
	Type of Security		Aggregate fering Price	An	nount Already Sold
	Debt	\$	250,000	\$	250,000
	Equity	\$		\$	
	☐ Common ☐ Preferred				
	Convertible Securities (including warrants)	\$		\$	
	Partnership Interests	_		\$	
	Other (Specify)	\$		\$	
	Total	\$		\$	250,000
	Answer also in Appendix, Column 3, if filing under ULOE.				
0.	Enter the number of accredited and non-accredited investors who have purchased securities in this offering and the aggregate dollar amounts of their purchases. For offerings under Rule 504, indicate the number of persons who have purchased securities and the aggregate dollar amount of their purchases on the total lines. Enter "0" if answer is "none" or "zero."				
			Number Investors	D	Aggregate ollar Amount of Purchases
	Accredited Investors		8	\$_	250,000
	Non-accredited Investors		0	\$	0
	Total (for filings under Rule 504 only)		n/a	\$	0
	Answer also in Appendix, Column 4, if filing under ULOE.				
0.	If this filing is for an offering under Rule 504 or 505, enter the information requested for all securities sold by the issuer, to date, in offerings of the types indicated, in the twelve (12) months prior to the first sale of securities in this offering. Classify securities by type listed in Part C-Question 1.				
	Type of Offering		Type of Security	D	ollar Amount Sold
	Rule 505		n/a	\$	0
	Regulation A		n/a	\$	0
	Rule 504		n/a	\$	0
	Total		n/a	\$	0
1.	a. Furnish a statement of all expenses in connection with the issuance and distribution of the securities in this offering. Exclude amounts relating solely to organization expenses of the issuer. The information may be given as subject to future contingencies. If the amount of an expenditure is not known, furnish an estimate and check the box to the left of the estimate.				
	Transfer Agent's Fees			\$	
	Printing and Engraving Costs			\$	300
	Legal Fees			\$	5,000
	Accounting Fees			\$	
	Engineering Fees			\$	·
	Sales Commissions (Specify finders' fees separately)			\$	
	Other Expenses (identify) Closing Costs			\$	2,500
	Total			\$	7,800

C. OFFERING PRICE, NUMBER OF INVESTORS, EXPENSES AND USE OF PROCEEDS

	C. OFFERING PRICE, NUMBER		D USE OF PRO	CEEDS
	b. Enter the difference between the aggregate offering Question 1 and total expenses furnished in response is the "adjusted gross proceeds to the issuer."			\$242,200
	Indicate below the amount of the adjusted gross probe used for each of the purposes shown. If the amount an estimate and check the box to the left of the est must be equal to the adjusted gross proceeds to the Question 4.b. above.	nt for any purpose is not known, furnish imate. The total of the payments listed		
			Payments to Officers, Directors & Affiliates	Payments To Others
	Salaries and fees		□ \$	□ \$
	Purchase of real estate		□ \$	
	Purchase, rental or leasing and installation of n	nachinery and equipment		□ \$
	Construction or leasing of plant buildings and	facilities		□ \$
	Acquisition of other businesses (including the offering that may be used in exchange for the a pursuant to a merger)	ssets or securities of another issuer	□ \$	□ \$
	Repayment of indebtedness		□ \$ <u> </u>	□ \$
	Working capital (In the Issuer's business, the a include the purchase of real estate)	pplication of working capital may	□ \$	\$ 242,200
	Other (specify):			
			□ \$	□ \$
	Column Totals		□ \$ <u>0</u>	\$ 242,200
	Total Payments Listed (column totals added)		s	242,200
	D.	FEDERAL SIGNATURE		
foll	issuer has duly caused this notice to be signed by the owing signature constitutes an undertaking by the issuest of its staff, the information furnished by the issuest of its staff, the information furnished by the issuest of its staff, the information furnished by the issuest of its staff, the information furnished by the issuest of its staff, the information furnished by the information f	uer to furnish to the U.S. Securities and E	exchange Commissio	n, upon written
	er (Print or Type) A Holdings, LLC	Signature	Date April 18, 20	005
	ne of Signer (Print or Type) chael J. Stewart	Title of Signer (Print or Type) Manager		

ATTENTION

Intentional misstatements or omissions of fact constitute federal criminal violations. (See 18 U.S.C. 1001.)